

Application Data Sheet**Application Information**

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | None |
| Computer Readable Form (CRF):: | No |
| Number of copies of CRF:: | 0 |
| Title:: | PROTECTION OF SURFACES AGAINST CAVITATION EROSION |
| Attorney Docket Number:: | 2004P03943WOUS |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | |
| Small Entity?:: | No |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Gov't Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: AUSTRIA
Status:: Full Capacity
Given Name:: KNUD
Middle Name::
Family Name:: THOMSEN
City of Residence:: KOBLENZ
State or Province of Residence::
Country of Residence:: SWITZERLAND
Street of Mailing Address:: LENGGSTRASSE 7
City of Mailing Address:: KOBLENZ
State or Province of Mailing Address::
Country of Mailing Address:: SWITZERLAND
Postal or Zip Code of Mailing Address:: 5322

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name::
Middle Name::
Family Name::
City of Residence::
State or Province of Residence::
Country of Residence:: GERMANY
Street of Mailing Address::

City of Mailing Address::
State or Province of Mailing Address::
Country of Mailing Address:: GERMANY
Postal or Zip Code of Mailing Address:: 36199

Correspondence Information

Correspondence Customer Number:: 28204

Representative Information

| | |
|----------------------------------|-------|
| Representative Customer Number:: | 28204 |
|----------------------------------|-------|

Domestic Priority Information

| | | | |
|---------------------|--|-------------------------|----------------------------|
| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This application | National Stage of | PCT/EP2004/009160 | 08/16/2004 |
| This application | An application claiming the benefit under 35 USC 119(e) | 60/542,292 | 02/09/2004 |

Foreign Priority Information

| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
|-----------|-------------------------|---------------|-----------------------|
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Assignment Information

Assignee Name:: PAUL SCHERRER INSTITUT

Street of Mailing Address::

City of Mailing Address:: VILLIGEN

State or Province of Mailing Address::

Country of Mailing Address:: SWITZERLAND

Postal or Zip Code of Mailing Address:: 5232